

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------------|
| FEE DETERMINATION | Ravel | | 10-21-01 |
| O.I.P.E. CLASSIFIER | | W6aw | 10/5/01 |
| FORMALITY REVIEW | KD | 1121 | 10-30-2001 |
| RESPONSE FORMALITY REVIEW | M | 825 | 11/9/02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 II Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 +- Restricted O Objected

| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

747
 11/16/02